

OCT-11-04 MON 05:38 PM WORKMAN NYDEGGER

FAX NO. 18013281707

P. 10/30

Application No. 10/697,725  
Amendment and Response to Final Office Action mailed May 10, 2004

VIA FACSIMILE (703) 872-9306

*Fee Only*  
PATENT APPLICATION  
Docket: 15436.249.40.1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Deng, et al.

Serial No.:

10/697,725

Confirmation No.:

7720

Filed:

October 30, 2003

For:

INTEGRATED OPTICAL ISOLATOR AND  
POLARIZATION BEAM COMBINER

Examiner:

Brandi N. Thomas

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Art Unit  
2873

VIA FACSIMILE (703) 872-9306  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO FIRST OFFICE ACTION

Sir:

This communication is in response to Examiner's Office Action mailed May 10, 2004 (the "Office Action"). Reconsideration is respectfully requested in view of the following amendments and remarks.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

Remarks/Arguments begin on page 16 of this paper.

/14/2004 PYARBORD 00000002 233178 10697725  
Ref: 00000002 DAH: 233178 10697725  
FC:i201 88.00 DA  
FC:i202 54.00 DA

1 of 21

PAGE 10/30 \* RCV'D AT 10/11/2004 7:36:30 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-13 \* DNIS:8729306 \* CSID:18013281707 \* DURATION (mm:ss):07:16

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number

*10697725*

*15150-2003-14031*

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	<i>32</i>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<i>32</i> minus 20=	* <i>12</i>
INDEPENDENT CLAIMS	<i>7</i> minus 3 =	* <i>4</i>
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY  
TYPE  OR OTHER THAN  
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	770.00
X\$ 9=		OR X\$18=	<i>216</i>
X43=		OR X86=	<i>344</i>
+145=		OR +290=	
TOTAL		OR TOTAL	<i>1330</i>

\* If the difference in column 1 is less than zero, enter "0" in column 2

*Amndt 10-11-03* CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* <i>35</i>	Minus	** <i>32</i> = <i>3</i>
Independent	* <i>8</i>	Minus	*** <i>7</i> = <i>1</i>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	<i>54</i>
X43=		OR X86=	<i>86</i>
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	<i>150</i>

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	*	Minus	** =
Independent	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	*	Minus	** =
Independent	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.